



**KILPATRICK
STOCKTON LLP**

Attorneys at Law

**RECEIVED
CENTRAL FAX CENTER**

MAY 15 2006

Suite 2800 1100 Peachtree St.
Atlanta GA 30309-4530
t 404 815 6500 f 404 815 6555
www.KilpatrickStockton.com

direct dial 404 815 6446
direct fax 404 541 3375
ARossi@KilpatrickStockton.com

May 15, 2006

FAX

RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
Central Fax	571.273.8300	Mail Stop Amendment U.S. Patent and Trademark Office Alexandria, VA

Angela M. Rossi

FROM

5

PAGES (WITH COVER)

2298

REFERENCE NO

10557/296452

CLIENT/MATTER NO.

PLEASE CALL 404 815 6497 IF YOU HAVE DIFFICULTY WITH THIS TRANSMISSION.

CONFIDENTIALITY NOTE:

The information contained in this fax message is being transmitted to and is intended for the use of the individual named above. If the reader of this message is not the intended recipient, you are hereby advised that any dissemination, distribution or copy of this fax is strictly prohibited. If you have received this fax in error, please immediately notify us by telephone and destroy this fax message.

COMMENTS

Re: U.S. Patent Application Serial No. 10/776409
Our. No. 10557/296452

This certifies that the attached Supplemental Information Disclosure Statement and Form PTO/SB/08 are being transmitted by facsimile on this 15th day of May 2006.

Angela M. Rossi

Angela M. Rossi

TO BE COMPLETED BY KS OPERATIONS CENTER

TRANSMISSION RECEIPT DATE/TIME: _____

COMPLETED BY: _____

JOB CODE

53952

ATLANTA AUGUSTA CHARLOTTE LONDON NEW YORK RALEIGH STOCKHOLM WASHINGTON WINSTON-SALEM

PAGE 1/5 * RCVD AT 5/15/2006 1:11:17 PM [Eastern Daylight Time] * SVR:USPTO-EFAX-3/11 * DNIS:2738300 * CSID:404 815 6555 * DURATION (mm-ss):01-54

MAY 15 2006

PTO/SB/21 (04-04)

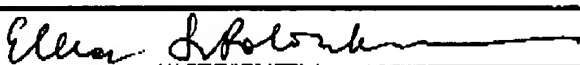
Approved for use through 07/31/2006. OMB 0551-0031

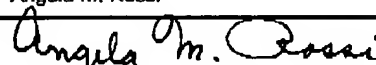
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/776,409
		Filing Date	February 10, 2004
		First Named Inventor	David C. KELMAN
		Art Unit	3739
		Examiner Name	
Total Number of Pages in This Submission		Attorney Docket Number	10557/296452

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Form PTO/SB/08 (one sheet)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Elena S. Polovnikova, Reg. No. 52,130
Signature	
Date	May 12, 2006

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO on the date shown below.			
Typed or printed name	Angela M. Rossi		
Signature		Date	5/15/06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

MAY 15 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICEAPPLICANT: David C. KELMAN, et
al.

SERIAL NO.: 10/776,409 Group Art Unit: 3739

FILED: February 10, 2004 EXAMINER:

FOR: RESORBABLE DEVICES

ATTORNEY DOCKET NO.: 10557/296452

DATE: May 12, 2006

Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, Virginia 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with Rules 56, 97 and 98 of the Rules of Practice in Patent Cases (37 C.F.R. §§ 1.56, 1.97, and 1.98), the publication listed on the modified Form PTO/SB/08 is cited for consideration by the Examiner

Submission of the references provided in this Information Disclosure is not intended to constitute an admission that any reference referred to herein is prior art for this invention unless specially designated as such. Also, in accordance with 37 C.F.R. § 1.97(g), the filing of this Information Disclosure Statement shall not be construed to mean that a search has been made or that no other material information as defined in 37 C.F.R. § 1.56(a) exists.

U.S. Serial No. 10/776,409
Filed: February 10, 2004
INFORMATION DISCLOSURE STATEMENT

This Information Disclosure Statement is being filed pursuant to 37 C.F.R. 1.97(b), before issuance of a first action on the merits. The Commissioner is authorized to charge any fees associated with this filing to Deposit Account No. 11-0855.

Respectfully submitted,



Elena S. Polovnikova
Reg. No. 52,130
Agent for the Assignee

KILPATRICK STOCKTON LLP
Suite 2800, 1100 Peachtree Street
Atlanta, Georgia 30309-4530
(404) 816.6500

MAY 15 2006

PTO/SB/D8A (10-01)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				Complete if Known	
Application Number				10/776,409	
Filing Date				February 10, 2004	
First Named Inventor				David C. KELMAN	
Group Art Unit				3739	
Examiner Name					
Attorney Docket Number				10557/296452	
Sheet	1	of	1		

U.S. PATENT DOCUMENTS					
Examiner Initials *	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code ² (if known)			
		US-2005/0107886 A1	05-19-2005	Crabtree, et al.	

FOREIGN PATENT DOCUMENTS						
Examiner Initials *	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ²
		Country Code ³ - Number ⁴ - Kind Code ⁵ (if known)				

OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

9310436